21-40665

FED 25 2002

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2002

Estimated average burden

SEC USE ONLY

Prefix

Serial

DATE RECEIVED

		·			
Name of Offering (check if this Private Placement of Preferred		me has changed, an	d indicate change.,)	
Filing Under (Check box(es) the		04 [] Rule 505	[X] Rule 506	Section 4(6) ULOE	—
Type of Filing: [] New Filing		04 [] Rule 303	A Rule 300	Section 4(0) [GEOE	
		C IDENTIFICATI	ON DATA		
1. Enter the information req	uested about the issuer				
Name of Issuer (check if this is ONE COMMUNICATION C		has changed, and in	ndicate change.)	02016744	
Address of Executive Offices	(Number and Street, City, State,	Zip Code)		Telephone Number (Including Area Cod	de)
(if different from Executive Of Brief Description of Business	fices)	nd Street, City, Sta	te, Zip Code) Tele	ephone Number (Including Area Cod	ie) ——
Type of Business Organization	l				
[] corporation	[] limited partnership	•	[] 01	ther (please specify): PROCES	CEN
[] business trust	[] limited partnership			_	
		onth Year		MAR 19	2002
Actual or Estimated Date of In Or Organization:	corporation [] []		[] Actual [] Estimated THOMS	MC
Jurisdiction of Incorporation of	•	etter U.S. Postal Service ada; FN for other foreig			
	GEN	ERAL INSTRUC	ΓIONS		

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under http://www.sec.gov/smbus/forms/regd.htm Regulation D (6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any opies no manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;

 Each executive officer and director of corporate issuers and of corporate general and managing paissuers; and Each general and managing partner of partnership issuers. 	artners of partnership
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] Full Name (Last name first, if individual) ROSCIGNO, THOMAS Business or Residence Address (Number and Street, City, State, Zip Code)	General and/or Managing Partner
	General and/or Managing Partner
Full Name (Last name first, if individual) LUCAS, ALBERT F. Business or Residence Address (Number and Street, City, State, Zip Code)	
	General and/or Managing Partner
Full Name (Last name first, f individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: [] Promoter [] Beneficial [] Executive Officer [] Director [] Owner	General and/or Managing Partner

Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: [] Promoter [] Beneficial [] Executive Officer [] Direct Owner	tor [General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: [] Promoter [] Beneficial [] Executive Officer [] Director Owner	[]	General and/or Managing Partner
Full Name (Last name first, if individual)	***	
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: [] Promoter [] Beneficial [] Executive [] Director Owner Officer	[]	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: [] Promoter [] Beneficial [] Executive [] Director Owner Officer	[]	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: [] Promoter [] Beneficial [] Executive [] Director Owner Officer	[]	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.) See Ad	ditiona	l Sheet
B. INFORMATION ABOUT OFFERING		
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Ye []	
Answer also in Appendix, Column 2, if filing under ULOE.		
2. What is the minimum investment that will be accepted from any individual?.	\$2	5,000
3. Does the offering permit joint ownership of a single unit?	Ye []	
4. Enter the information requirested for each nerson who has been as will be neid as given direct		•

4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.

Full Na	ıme (Last	name fir	st, if indiv	vidual)	<u> </u>			<u> </u>				
Busin	ess or Re	sidence A	Address (1	Number a	nd Street,	City, Sta	ite, Zip C	ode)				
Name	of Assoc	ciated Bro	oker or De	ealer		.						
States	in Whic	h Person	Listed Ha	s Solicite	d or Inter	nds to Sol	icit Purch	nasers				
	<u></u>									· · · · · ·		
,			eck indiv		•						All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[111]	נבים	[***]	[111]	נייין	[1114]	נייון	[.,0]	[[]			[OIG	[PR]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	. [WY]	
Full Na	ıme (Last	name fir	st, if indiv	vidual)								
Busine	ss or Res	idence Ac	idress (N	umber an	d Street, (City, State	e, Zip Co	de)	·			
Name o	of Associ	ated Brok	er or Dea	ıler						·		
States i	n Which	Person L	isted Has	Solicited	or Intend	ls to Solid	cit Purcha	sers				
(Check	"All Sta	tes" or ch	eck indiv	idual Stat	es)					[]	All States	s
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	Vame (La	st name f	irst, if ind	lividual)			· 		· · · · ·			
Busin	ess or Re	sidence A	Address (1	Number a	nd Street,	City, Sta	ite, Zip C	ode)				
Name	of Assoc	ciated Bro	oker or De	ealer								
States	in Whic	h Person	Listed Ha	s Solicite	d or Inter	nds to Sol	icit Purch	nasers				
(Check	"All Sta	tes" or ch	eck indiv	idual Stat	tes)					[]	All States	S

.

[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	0	0
Equity: SERIES A PREFERRED NON-VOTING STOCK	\$2,500,000	\$120,000
[] Common [X] Preferred		
Convertible Securities (including warrants)	\$ 0	\$ 0
Partnership Interests		
Other (Specify:).		
Total	\$ 0	\$ 0

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under $\underline{\text{Rule }504}$, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	6	\$120,000
Non-accredited Investors	0	0
Total (for filings under Rule 504 only)		

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u>, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees	[]	\$ 0
Printing and Engraving Costs	[]	\$ 0
Legal Fees	[]	\$13,800
Accounting Fees	[]	\$ 0
Engineering Fees	[]	\$ 0
Sales Commissions (specify finders' fees separately)	[]	\$ 0
Other Expenses (identify):	[]	\$
Total	[]	\$
b. Enter the difference between the aggregate offering price given in response Question 1 and total expenses furnished in response to Part C - Question 4.a. This diffusive gross proceeds to the issuer."		\$2,486,200

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees	[]\$	[]\$
Purchase of real estate	[]\$	[]\$
Purchase, rental or leasing and installation of machinery and equipment	[]\$	[]\$ 550,000
Construction or leasing of plant buildings and facilities	[]\$	[]\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$	[]\$
Repayment of indebtedness	[]\$	[]\$ 100,000
Working capital	[]\$	[X] \$1,836,200
Other (specify):	[]\$	[]\$
	[]\$	[]\$
Column Totals	[] \$2,486,200	[]\$
Total Payments Listed (column totals added)	[] \$2,486,200	

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under, <u>Rule 505</u> the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of <u>Rule 502</u>.

ISSUER
ONE COMMUNICATION CORPORATION

SIGNATURE

2/7/02

ATTENTION

International misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

1. Is any party described in 17 CFR 230,262 presently subject to any of the disqualification provisions of such rule? Yes [X]

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

ISSUER ONE COMMUNICATION CORPORATION	SIGNATURE DATE 2/7/02
NAME OF SIGNER (Print or Type) A. F. LUCAS	TITLE (Print or Type) VICE PRESIDENT

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend to non-a investor	2 I to sell accredited as in State 1-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	а	Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Preferred Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount		No
AL									
AK									
ΑZ							i		
AR		-							
CA									
со									
CT									
DE									
DC									
FL									
GA									
HI									
ID									_
IL									
IN									
ΙA	·								
KS									
KY	:								
LA									
ME									
MD									
MA									
MI									
MN									
MS									
МО									i

1	Intend to non-a investor	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Preferred Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount		No	
MT										
NE										
NV										
NH										
NJ										
NM										
NY										
NC										
ND										
ОН										
OK										
OR										
PA		·								
RI										
SC										
SD										
TN										
TX										
UT										
VT										
VA		X	\$350,000	6	\$120,000	0	0		X	
WA										
WV										
WI										
WY										
PR										